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Bib Data Sheet

CONFIRMATION NO. 8664

SERIAL NUMBER 10/053,462	FILING DATE 11/08/2001 RULE	CLASS 607	GROUP ART UNIT 3762	ATTORNEY DOCKET NO. A01P1083
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## APPLICANTS

Laurence S. Sloman, West Hollywood, CA;

*Verified KDM*

## \*\* CONTINUING DATA \*\*\*\*\*

*none KDM*

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

*none KDM*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 03/01/2002

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged	<i>Kris Muller KDM</i> Examiner's Signature Initials	CA	5	20	4

## ADDRESS

36802  
PACESETTER, INC.  
15900 VALLEY VIEW COURT  
SYLMAR, CA  
91392-9221

## TITLE

Patient state information in cardiac stimulation device parameters

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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VERIFIED AND  
ACKNOWLEDGED

Examiner's Signature

Initials

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Sylmar, CA 91392-9221

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